## PART B - FEE(S) TRANSMITTAL

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	maintenance fee notifications										
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	41 ST FL.		/	2	ddressed to the Ma	il Stop ISSUE FEE address	above, or being facsimile				
6-2714	NEW YORK, NY 1	714	ADD 0.7 mm	į	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.						
APR 17 2004					(Depositor's name)						
	**	,	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				(Signature)				
	<u>.</u> .		PRADEMARK	Į			(Date)				
FILING DA	APPLICATION NO.	ING DATE		AMED INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.				
11/01/20	10/001,316	1/01/2001	Hid	leyuki Harada		2339					
LAYERED	TITLE OF INVENTION: M	YERED CERAM	IC SUBSTRATE AND PRO	DDUCTION M	ETHOD THEREFO	R					
SMALL ENT	APPLN. TYPE	ALL ENTITY	ISSUE FEE	PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE				
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FEE TRANSMITTAL		Complete if Known							
ILL INANSMITTAL	7 topiloation (Validos)			10/001,316-Conf. #2339					
for FY 2004						November 1, 2001			
	First Named Inventor			Hideyuki Harada					
Effective 10/01/2003, Patent fees are subject to annual revision.	Examiner Name					M. C. Ma	yes		
Applicant claims small entity status. See 37 CFR 1.27	Art Unit					1734			
TOTAL AMOUNT OF PAYMENT (\$) 1,660.00		Attorney Docket No. M1071.1485/P1485					485/P1485		
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Credit Money	3. ADDITIONAL FEES								
Check X Card Order Other None	S. ADDITIONAL I ELO								
Deposit Account:	5								
Deposit Account 50-2215		Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Description							
Number	Code		Code	(\$)		Fee Desc	cription	Fee Paid	
Deposit Dickstein Shapiro Morin &	1051	130	2051	65	Surcharge -	late filing fe	e or oath		
Account Name Oshinsky LLP	1052	50	2052	25	Surcharge -	late provisi	onal filing fee or cover		
The Director is authorized to: (check all that apply)	1002	00	2002	20	sheet.				
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English	specificatio	n		
Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a re	quest for ex p	parte reexamination		
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Requesting Examiner ac		of SIR prior to		
to the above-identified deposit account.	1805	1,840*	1805	1,840°	Requesting Examiner ac	publication o	of SIR after	•	
FEE CALCULATION	1251	110	2251	55	Extension fo		n first month		
1. BASIC FILING FEE	1252	420	2252	210	Extension fo	r reply within			
Large Entity Small Entity	1253	950	2253	475	Extension fo	r reply within	n third month		
Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension fo	or reply within	n fourth month		
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension fo	r reply within	n fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Ap	peal			
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief	in support o	of an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for	oral hearing			
1005 160 2005 80 Provisional filing fee	1451	-	1451			etition to institute a public use proceeding			
SUBTOTAL (1) (\$) 0.00	1452		2452	55	Petition to re			<b></b>	
	1453	•	2453	665	Petition to re		4 222 22		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501		2501	665	Utility issue		ue)	1,330.00	
Claims below Fee Paid	1502		2502	240	Design issue				
Total Claims 8 -20** =   x   = 0.00	1503 1460		2503 1460	320	Plant issue f		oiones.		
Claims		130		130	Petitions to t				
Multiple Dependent =	1807	50	1807	50	_		CFR 1.17(q)		
Large Entity Small Entity	1806	180	1806	180			on Disclosure Strnt		
Fee Fee Fee Code (\$) Fee Description	8021	40	8021	40			ssignment per of properties)		
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a subr		final rejection		
1201   86   2201   43   Independent claims in excess of 3   1203   290   2203   145   Multiple dependent claim, if not paid	1810	770	2810	385	For each ad	ditional inve			
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385	examined (3 Request for		(tb)) Examination (RCE)		
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request for of a design a		xamination		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	Other	Other fee (specify) 8001; Printed co				py of patent w/o color; Publication			
SUBTOTAL (2) (\$) 0.00	*Red	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 1,660.00							
**or number previously paid, if greater; For Reissues, see above		,							
SUBMITTED BY						(Complete	(if applicable))		
Name (Print/Type) Edward A. Meilman		ration No ey/Agent)		,735		Telephone	(212) 896-5471		
Signature Elwedh. Wor	2:					Date	April 7, 2004		